ECHO Data Partner Application Form

Organization Full Name: _____

Organization Short Name or Acronym: _____

Organization URL: _____

Description of Data Holdings, including key words that best represent your data: _____

_____

_____

_____

_____

_____

Describe any security/access restrictions for your data: _____

_____

Approximate total number of granules: _____

Approximate total number of browse/preview images: _____

Describe requirements for revising or replacing the metadata in ECHO: _____

_____

Customer costs associated with the data: _____

Target date for metadata availability in ECHO: _____

Contact Information for Data Partner:

Name: _____

Email: _____

Telephone: _____ **Fax**: _____

Address: _____

Address2: _____

City: _____ **State**: _____ **Zip**: _____